

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-875)

SERIAL NO. 09/749 674	FILING DATE 12-27-00
APPLICANT(S)	

CLAIMS

	AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
1	1					
2		1				
3		1				
4		1				
5		1				
6		1				
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TOTAL IND.	1					
TOTAL DEP.	8					
TOTAL CLAIMS	9					

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IND.	DEP.	IND.	DEP.	IND.
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TOTAL IND.				
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TOTAL CLAIMS				